APPLICATION FOR PERMIT TREE REMOVAL/MAINTENANCE

City of Ocean Springs Building Department 1018 Porter Avenue, Ocean Springs, MS 39564 228-875-6712 (Phone) 228-872-5427 (Fax)

Application is hereby made to the City of Ocean Springs, MS for official permission for tree removal and/or tree maintenance within the City limits. Application is being submitted in accordance with the guidelines defined in Section 4.11 of the City Unified Development Code effective April 26, 2019.

Application Date:

Address/Location of Work to be Performed:	
Applicant Information:	
Name:	Email:
Phone:	Alt Phone:
Owner Information (if different than applicant):	
Name:	Email:
Phone:	Alt Phone :
Tree Contractor Information (if applicable):	
Name:	Email:
Phone:	Alt Phone :
☐ Site Plan for Reference (the site plan must d street/driveway)	tion for each has been provided and/or adhered to: epict where the trees are in relation to the structure(s) and been identified with ribbon (supplied by the City of Ocean

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I, the undersigned applicant, affirm that the foregoing informmation is true and accurate. I will have the full authority over the tree removal and/or tree alteration as described. I also acknowledge that, by submitting this application to the Tree Protection Committee, I do hereby authorize any agent of said committee to visit the location listed above as he or she deems necessary to make an informed decision regarding my application. It is my responsibility to contact the Building Department for the decision that was made regarding the application.

Applicant Signature	(Date
Office Use Only:	
Building Official Findings:	
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MAYOR AND BOARD OF ALDERMEN AGENDA DATE:	